

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM543268

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	ENTITY CONVERSION		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Lotus Clinical Research, LLC		11/17/2010	Limited Liability Company: CALIFORNIA
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Lotus Clinical Research, LLC		
<b>Street Address:</b>	100 W. California Blvd, Unit #25		
<b>City:</b>	Pasadena		
<b>State/Country:</b>	CALIFORNIA		
<b>Postal Code:</b>	91105		
<b>Entity Type:</b>	Limited Liability Company: DELAWARE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4066180	LOTUS	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	3175924684		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Phone:</b>	317-236-2389		
<b>Email:</b>	erica.clark@icemiller.com, ipdocket@icemiller.com		
<b>Correspondent Name:</b>	Erica Clark/Ice Miller LLP		
<b>Address Line 1:</b>	One American Square, Ste 2900		
<b>Address Line 4:</b>	Indianapolis, INDIANA 46282		
<b>NAME OF SUBMITTER:</b>	Erica Clark		
<b>SIGNATURE:</b>	/Erica Clark/		
<b>DATE SIGNED:</b>	10/01/2019		
<b>Total Attachments: 1</b>			
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OP \$40.00 4066180



**State of California  
Secretary of State**

CONV-1A

File #

**201032610122**

**CERTIFICATE OF CONVERSION**

**FILED**  
In the Office of the Secretary of State  
of the State of California

**DEC 08 2010**

**IMPORTANT — Read all instructions before completing this form.**

This Space For Filing Use Only

**CONVERTED ENTITY INFORMATION**

1. NAME OF CONVERTED ENTITY LOTUS CLINICAL RESEARCH, LLC			
2. FORM OF ENTITY LLC	3. JURISDICTION DELAWARE		
4. MAILING ADDRESS OF CHIEF EXECUTIVE OFFICE 100 W. CALIFORNIA BOULEVARD	CITY PASADENA	STATE CA	ZIP CODE 91105
5. STREET ADDRESS OF CHIEF EXECUTIVE OFFICE 100 W. CALIFORNIA BOULEVARD	CITY PASADENA	STATE CA	ZIP CODE 91105
6. STREET ADDRESS OF THE CALIFORNIA OFFICE, IF ANY 100 W. CALIFORNIA BOULEVARD	CITY PASADENA	STATE CA	ZIP CODE 91105
7. MAILING ADDRESS OF AGENT FOR SERVICE OF PROCESS 100 W. CALIFORNIA BOULEVARD	CITY PASADENA	STATE CA	ZIP CODE 91105

**CONVERTING ENTITY INFORMATION**

8. NAME OF CONVERTING ENTITY LOTUS CLINICAL RESEARCH, LLC		
9. FORM OF ENTITY LLC	10. JURISDICTION CALIFORNIA	11. CA SECRETARY OF STATE FILE NUMBER, IF ANY 201032610122
12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS: <u>STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE</u> AND <u>THE PERCENTAGE VOTE REQUIRED OF EACH CLASS</u> 100% MEMBERSHIP INTERESTS MORE THAN 50%		

**ADDITIONAL INFORMATION**

13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

14. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

NOVEMBER 17, 2010

DATE

SIGNATURE OF AUTHORIZED PERSON

NEIL SINGLA, MANAGER

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON